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(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
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DIVISION OF CORPORATION

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APR 2 2 2013

COVER LETTER

SUBJECT: Duff COAS 7 Holdings LLC Name of Limited Liability Company				
	Name of Limite	ed Liability Company		
The enclosed Articles of Ar	mendment and fee(s) are subr	mitted for filing.		
Please return all correspond	dence concerning this matter t	to the following:		
	Anthony ?	Name of Person		
	Gulfco	AST Holding	s.LLc	
	35246	US Huy 19 Address	N #/02	
	PALM H	AABOA FL. City/State and Zip Code	34684	
	Villantovo E-mail address: (do	os tics O MSN.Com be used for future annual report notification	on)	
For further information con	ncerning this matter, please ca	ılı:		
Anthony Name of F	Villasyso Person	at (<u>777) </u>	ephone Number	
Enclosed is a check for the following amount:				
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ny f Coas 7 (Name of the Limited L	Holdings LLC	
	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Lia		_ and assigned
This amendment is submitted to amend the follow	_	SECRETARY VISION OF CI
A. If amending name, enter the new name of t	the limited liability company here:	AH CREASE
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the designation "LLC	C" or the abbreviation
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered office address on our records, <u>enter the</u> i <u>ce address here</u> :	name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	ss
	, Florida	
	City	7in Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

Title	<u>Name</u>	Address	Type of Action
MERM	Billie Cecilia Fu	ud action k	Add
		35246 US HUY 1910 ERLM HARBUR, FL	34634
			Add
	•••		Remove
			Add
			Remove
			SECRETARE DIVISION OF E
			FILED DF BORPCRATIONS 19 ANII: LL
			Remove
			Add
			Remove

D. If am	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
		-
Dated	4/15/13	-
<u></u>	Signature of a member or authorized representative of a member	— 0
	Typed or printed name of signee Page 3 of 3	y Membe-
	Filing Fee: \$25.00	

SECRETARY OF STATE DIVISION OF CORPORATIONS